PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax 871-273-2885

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

INSTRUCTIONS: This form should be used for transmitting the ISSTE EES and PESICATION FEE (if required), Bockes 1 brough 5 stoud by completed where appropriate, All Interfect correspondence including the Period and outflicted and attainment of the mixed to this course consequence including the appropriate of the contraction of the cont

23696 7590 QUALCOMM INCO 5775 MOREHOUSE D SAN DIEGO, CA 9212	R.	pap hav	papers. Each additional paper, such as an actignment or formal decomposition, between the such as the actignment of formal decomposition have its own certificate of mailing or transmission. I hearby certify that his Peefs I Pransmital is being deposited with the United States Potal Service with solitication possage for first class mad in an erveton states that the contract of the property of th				
			<u>_</u>				(Depositor r exme
			<u> </u>				(Figureture)
			L_				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DECKET NO.		CONFERMATION NO.
10/670,910 TITLE OF INVENTION: METH SYSTEM	09/24/2003 OD AND APPAI	RATUS FOR SCHEDU	Jack M. Holtzman LING PACKET DATA T	RANSMISSION IN		010088C1 ELESS COMMUNIC	6518 ATTON
AFPLN. TYPE SMA	LLENTIFY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	PER	TOTAL PEE(S) DUE	DAISDUB
anaprovisional	NO	\$1510	\$300	\$0		\$1810	01/27/2011
EXAMINER	EXAMINER		CLASS-SUBCLASS				
WONG, BLANCH	WONG, BLANCHE		370-329000				
I. Change of correspondence addle SERI 1.56(s) Change of correspondence. Addless from PFOSDI122) at Addless from PFOSDI122) at Change of Correspondence. Addless from PFOSDI122) at Change of the Cha	address (or Chan, tached. or "Fee Address" : re recent) attached IDENCE DATA' ssignee is identified in the complete that it is identified. ENCORPOR since category or c	te of Correspondence indication form I. Use of a Customer FO BE PRINTED ON 't ed below, no assignee tion of this form is NO ATED attegories (will not be pr	data will appear on the p I a substitute for filing an (B) RESIDENCE: (CITY San Diec inted on the patent):	a registered putent weby. If the firm (having as a to time the time that the time) and the name measy or agents. If me printed. The first time that the time time that the time time time that the time time time time time time time tim	member s of up t o name i c is iden UNTR' OF N i poration	tiffed below, the dox	peatity Governmen
4a. The following fee(s) are submitted: Susce Pee Publication Fee (No small estity discount permitted) Advance Order - # of Copies			th. Payment of Feefs): (Please first rengely any previously guid issue fee shown above) A check is enclosed. Payment by credi card. Form PTO 2038 is attached. The Director is berely authorized to charge the required fee(s), any deficiency, or credit any coverpayment. In Deposit Account number 1700.26.				
 Change in Entity Status (from a. Applicant claims SMAL) 			D		. rarrm	m	1 200 100
**			from anyone other than 6				
NOTE: The Issue Fee and Publica interest as shown by the records of Authorized Signature Typed or printed name Charleston Conflictuation is to application. Conflictuation is to application. Conflictuation is to application. Conflictuation for name of the Issue Isue I	OG marles t	y Gers		Date{Registration No	26	12011 6,343	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Note: A certificate of mailing can only be used for domestic mailings of the